



**Consulate General of the United States of America  
Lagos, Nigeria**

**AFFIDAVIT OF PARENTAGE AND PHYSICAL PRESENCE**

I, \_\_\_\_\_, do solemnly swear (or affirm) that I am an American citizen by: (*choose one*):

- ☐ birth in :(*city/town, state*) \_\_\_\_\_ on (*date*) \_\_\_\_/\_\_\_\_/\_\_\_\_
- ☐ naturalization on (*date*) \_\_\_\_/\_\_\_\_/\_\_\_\_ before the (*name of court*) \_\_\_\_\_
- ☐ birth abroad on (*date*) \_\_\_\_/\_\_\_\_/\_\_\_\_ to American parent(s)

That I have been physically present in the United States as follows:

PLACE ( <i>CITY, STATE</i> )	DATE ( <i>MONTH/DAY/YEAR</i> )	DATE ( <i>MONTH/DAY/YEAR</i> )
_____	From ____/____/____	To ____/____/____
_____	From ____/____/____	To ____/____/____
_____	From ____/____/____	To ____/____/____
_____	From ____/____/____	To ____/____/____

(Continue on separate sheet, if necessary.)

That I have been physically present abroad as follows:

PLACE ( <i>CITY, COUNTRY</i> )	DATE ( <i>MONTH/DAY/YR</i> )	DATE ( <i>MONTH/DAY/YR</i> )	PURPOSE*
_____	From ____/____/____	To ____/____/____	_____
_____	From ____/____/____	To ____/____/____	_____
_____	From ____/____/____	To ____/____/____	_____
_____	From ____/____/____	To ____/____/____	_____

(Continue on separate sheet, if necessary).

**\*Indicate purpose of trip: vacation, residence, business, studies, U.S. military service, U.S. military dependent, etc. If working abroad, give name of employer.**

That my Social Security Number is \_\_\_\_\_; That I have served in the United States Armed Forces from  
\_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_;  
(date) (date)

That I was married on \_\_\_\_/\_\_\_\_/\_\_\_\_ at \_\_\_\_\_ to \_\_\_\_\_.  
(date) (place) (name of spouse)

That neither my spouse nor I was previously married; **OR** that I/my spouse was previously married on \_\_\_\_/\_\_\_\_/\_\_\_\_  
to \_\_\_\_\_ and that the marriage was terminated by death/divorce on \_\_\_\_/\_\_\_\_/\_\_\_\_.

**AFFIDAVIT OF PARENTAGE AND PHYSICAL PRESENCE – continued**

That, to the best my knowledge, I am the natural father/mother of the following children:

NAME	DATE OF BIRTH	PLACE OF BIRTH
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(Continue on separate sheet, if necessary.)

That the other parent of the above-named child/children is \_\_\_\_\_ whom I first  
(name)  
met on \_\_\_\_/\_\_\_\_/\_\_\_\_ at \_\_\_\_\_.  
(date) (city, state or country)

**That, if any child named above was born out of wedlock and I am the father/mother through whom such child is claiming United States citizenship, I agree to provide financial support for such child until such child reaches the age of eighteen years.\***

**\*NOTE:** The preceding phrase may be deleted; however, if it is deleted by a United States citizen who fathered a child born out of wedlock to a foreign woman, the child will not be eligible for United States citizenship under Section 309(a) of the Immigration and Nationality Act, as amended on November 14, 1986.

That I have the following adopted children:

NAME	DATE OF BIRTH	PLACE OF BIRTH
_____	_____	_____
_____	_____	_____

(Continue on separate sheet, if necessary.)

**WARNING:** False statements made knowingly and willfully in passport applications or affidavits or other supporting documents are punishable by fine and/or imprisonment under the provisions of 18 USC 1001 and/or 18 USC 1542.

I solemnly swear (or affirm) that the statements made on all of the pages of this affidavit are true and complete to the best of my knowledge and belief and that this affidavit is for the purpose of establishing my relationship to the aforementioned child/children and his/her/their claim to United States citizenship.

**Signature of affiant:** \_\_\_\_\_

**Present Street Address:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

SUBSCRIBED AND SWORN TO (AFFIRMED) before me this \_\_\_\_\_ day of \_\_\_\_\_ 200\_\_ at \_\_\_\_\_

\_\_\_\_\_  
(city, state or country)

\_\_\_\_\_

(SEAL)